## **BEST AVAILABLE COPY**

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

098-2465

Effective October 1, 2000								•	9 / 8		ے کا جا ہے	
			S FILED - PART ( (Column 1)		(Column 2)		SMALI TYPE	SMALL ENTITY TYPE		OR	OTHER	
TOTAL CLAIMS			48 45				RAT	Ε	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			₹ minus 20= * .		2	76	X\$ 9	=	Ws.	OR	X\$18=	414.00
INDEPENDENT CLAIMS			/U minus 3 =		7	X40	X40= 24		OR	X80=	400.00	
ΜL	ILTIPLE DEPEN	IDENT CLAIM P	RESENT '			<u> </u>	+135	=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA	\L	950	OR	TOTAL	
	C	LAIMS AS A	MENDED - PART II					•	860-	8	OTHER	THAN
		(Column 1)	(Column 2) (Column 3)				SMAI	LL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	-		OR	X\$18=	
	Independent	•	Minus			=	X40=	-		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135:	_		OR	+270=	
								AL EE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	: RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9:	=		OR	X\$18=	
	Independent	NITATION OF M	Minus	***	CLAIM	=	X40=	:	•	OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+270=	
							TOT ADDIT. F			OR	TOTAL ADDIT. FEE	
		3										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9:	=		OR	X\$18=	
	Independent	•	Minus	<b></b>		=	X40=	_		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR						+135:	1			+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR		
••	** If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											